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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/551,416	09/30/2005	Mikiko Kaminuma	AIA-110-PCT	5592
28892 SNIDER & AS	7590 08/07/200 SOCIATES	8	EXAMINER CODOLOGY LAW A	
P. O. BOX 27613			SOROUSH, LAYLA	
WASHINGTO	N, DC 20038-7613		ART UNIT PAPER NUMBER	
			1617	
			MAIL DATE	DELIVERY MODE
			08/07/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	0/551,416 KAMINUMA ET AL.		۹L.
interview Summary	Examiner	Art Unit	
	LAYLA SOROUSH	1617	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>LAYLA SOROUSH</u> .	(3)		
(2) <u>Ronald Snider</u> .	(4)		
Date of Interview: 24 June 2008.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2)∏ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.		
Claim(s) discussed:			
Identification of prior art discussed:			
Agreement with respect to the claims f)☐ was reached. g)∏ was not reached. h)∏ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>A phone call was made to received a response to the rejection made on December 1</u>	<u>o Mr.Ronald Snider on June 2</u>	24, 2008. The off	
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached.	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE, OF THE SUBSTANCE OF THE INTERVIEW ON REVERSE SIDE OF THE SUBSTANCE OF THE SUBSTANCE OF THE INTERVIEW OF THE SUBSTANCE OF TH	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP OAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	

Application No.

Applicant(s)